## 15090000

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



700164051137

01/04/10--01026--016 \*\*35.00

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ.	ECT: Steppers With A Purpose, Inc.
	(Name of Corporation)
DOC	JMENT NUMBER: N09000006998
The er	closed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Olla	Washington
	(Name of Person)
Step	pers With A Purpose, Inc.
-	(Name of Firm/Company)
100	Bth Ave Apt 29
· <u>-</u> :	(Address)
Shal	mar, FL 32579
	(City/State and Zip Code)
For fu	ther information concerning this matter, please call:
Keish	a C. Thomas at ( 850 ) 259-6497
	a C. Thomas at (850) 259-6497  (Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Amend Division Clifton 2661	Address: Ilment Section On of Corporations On Building Executive Center Circle assee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314
e o = *	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Monica D. Chisolm	, hereby resign as Vice Chairman
<u></u>	(Title)
of_ Steppers With A Purpose, Inc	
(Nam	e of Corporation)
N0900006998 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
Mou	(Signature of resigning officer/director)  SECRETARY  (Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314